EXHIBIT 13

WORLD HEALTH ORGANIZATION INTERNATIONAL AGENCY FOR RESEARCH ON CANCER



IARC Monographs on the Evaluation of Carcinogenic Risks to Humans

VOLUME 93 Carbon Black, Titanium Dioxide, and Talc



WORLD HEALTH ORGANIZATION INTERNATIONAL AGENCY FOR RESEARCH ON CANCER

PageID: 234736



IARC Monographs on the Evaluation of Carcinogenic Risks to Humans

VOLUME 93

Carbon Black, Titanium Dioxide, and Talc

This publication represents the views and expert opinions of an IARC Working Group on the Evaluation of Carcinogenic Risks to Humans, which met in Lyon,

7-14 February 2006

PageID: 234737

IARC MONOGRAPHS

In 1969, the International Agency for Research on Cancer (IARC) initiated a programme on the evaluation of the carcinogenic risk of chemicals to humans involving the production of critically evaluated monographs on individual chemicals. The programme was subsequently expanded to include evaluations of carcinogenic risks associated with exposures to complex mixtures, lifestyle factors and biological and physical agents, as well as those in specific occupations. The objective of the programme is to elaborate and publish in the form of monographs critical reviews of data on carcinogenicity for agents to which humans are known to be exposed and on specific exposure situations; to evaluate these data in terms of human risk with the help of international working groups of experts in chemical carcinogenesis and related fields; and to indicate where additional research efforts are needed. The lists of IARC evaluations are regularly updated and are available on the Internet at http://monographs.iarc.fr/.

This programme has been supported since 1982 by Cooperative Agreement U01 CA33193 with the United States National Cancer Institute, Department of Health and Human Services. Additional support has been provided since 1986 by the Health, Safety and Hygiene at Work Unit of the European Commission Directorate-General for Employment, Social Affairs and Equal Opportunities, and since 1992 by the United States National Institute of Environmental Health Sciences, Department of Health and Human Services. The contents of this volume are solely the responsibility of the Working Group and do not necessarily represent the official views of the U.S. National Cancer Institute, the U.S. National Institute of Environmental Health Sciences, the U.S. Department of Health and Human Services, or the European Commission Directorate-General for Employment, Social Affairs and Equal Opportunities.

This volume was made possible, in part, through Cooperative Agreement CR 834012 with the United States Environmental Protection Agency, Office of Research and Development. The contents of this volume do not necessarily reflect the views or policies of the U.S. Environmental Protection Agency.

> Published by the International Agency for Research on Cancer, 150 cours Albert Thomas, 69372 Lyon Cedex 08, France [©]International Agency for Research on Cancer, 2010

Distributed by WHO Press, World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland (tel.: +41 22 791 3264; fax: +41 22 791 4857; e-mail: bookorders@who.int).

Publications of the World Health Organization enjoy copyright protection in accordance with the provisions of Protocol 2 of the Universal Copyright Convention. All rights reserved.

The International Agency for Research on Cancer welcomes requests for permission to reproduce or translate its publications, in part or in full. Requests for permission to reproduce or translate IARC publications - whether for sale or for noncommercial distribution – should be addressed to WHO Press, at the above address (fax: +41 22 791 4806; email: permissions@who.int).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the World Health Organization concerning the legal status of any country, territory, city, or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

The IARC Monographs Working Group alone is responsible for the views expressed in this publication.

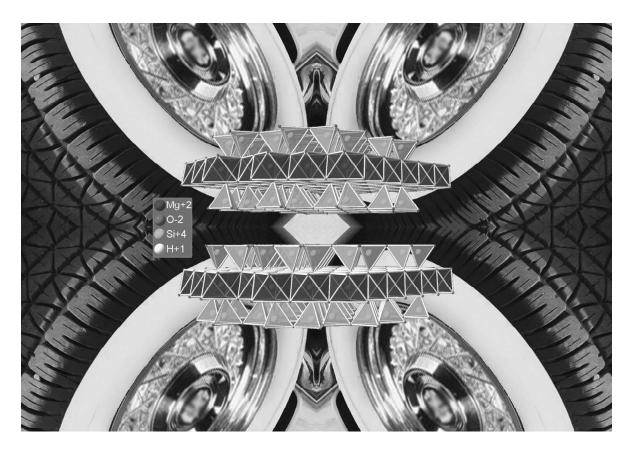
IARC Library Cataloguing in Publication Data

Carbon black, titanium dioxide, and talc / IARC Working Group on the Evaluation of Carcinogenic Risks to Humans (2006: Lyon, France)

(IARC monographs on the evaluation of carcinogenic risks to humans; v. 93)

1. Carcinogens, Environmental 2. Inhalation Exposure – adverse effects 3. Lung Neoplasms – chemically induced 4. Soot – toxicity 5. Talc – toxicity 6. Titanium – toxicity

I. IARC Working Group on the Evaluation of Carcinogenic Risks to Humans II. Series ISBN 978 92 832 1293 5 (NLM Classification: W1) ISSN 1017-1606



Cover photograph: The white-wall automobile tyre represents carbon black and titanium dioxide; the chemical structure illustrates the platy structure of talc (see Section 1 for details).

PageID: 234739

Document 33119-15

GENERAL REMARKS

This ninety-third volume of IARC Monographs contains evaluations of the carcinogenic hazard to humans of three chemically inert, poorly soluble particles: carbon black, titanium dioxide, and talc. In 2003 an Advisory Group on priorities for future evaluation recommended that carbon black and titanium dioxide be considered with high priority (IARC 2003), and in 2004 an Advisory Group to plan a series of IARC Monographs on air pollution recommended that these particles be reviewed before complex mixtures such as diesel engine exhaust. Talc is included in this volume because as an inhaled particle it has many features in common with carbon black and titanium dioxide, and as a consumer product it has been the subject of an abundance of epidemiological studies. Each of the three agents in this volume has been reviewed before. Carbon black was evaluated in Volume 65, titanium dioxide in Volume 47, and talc not containing asbestiform fibres in Supplement 7. New epidemiological and experimental studies are reviewed in this volume.

This volume does not review carbon-based particles of more complex or variable composition, such as activated charcoal, toner, charbone, and soot. This volume also does not review ultrafine and engineered nano-forms of these particles, because there are few pertinent studies. The physical properties and mechanistic studies of ultrafine and nanoparticles that are reviewed in this volume suggest that these smaller particles, due to their greater surface area per unit of mass, may be more effective in inducing toxic effects

The review of talc in Supplement 7 led to evaluations for two agents: talc containing asbestiform fibres and talc not containing asbestiform fibres. The term 'asbestiform fibre' has been mistaken as a synonym for 'asbestos fibre' when it should be understood to mean any mineral, including talc, when it grows in an asbestiform habit. To avoid confusion over the term 'asbestiform fibre', the present Working Group decided that it is scientifically more precise to call the agent 'talc not containing asbestos or asbestiform fibres', and this evaluation supersedes the earlier review of talc not containing asbestiform fibres. The present Working Group also decided to expand the name of the Group-1 agent from 'talc containing asbestiform fibres' to 'talc containing asbestos or other asbestiform fibres'. The present Working Group reviewed the earlier *Monograph* on talc containing asbestiform fibres and determined that the expanded name is consistent with what had been evaluated in Supplement 7. No update was undertaken for this Group-1 agent.

Page 7 of 9

TALC NOT CONTAINING ASBESTIFORM FIBRES

Document 33119-15

PageID: 234740

1. Exposure Data

Introduction

Talc refers to both mineral talc and industrial mineral products that are marketed under the name talc and contain proportions of mineral talc that range from about 35% to almost 100%.

The mineralogy of airborne particles in talc mines is restricted by that of the deposit and associated rocks. Therefore, mines and mills provide an opportunity to characterize exposure to one specific source of talc mineralogically. In contrast, the mineralogy of talc in an industrial setting where talc products are used may be difficult to characterize, because many different sources of talc are available for almost every application. Industrial tales are quite variable in their tale content and in the identity and proportion of other minerals that they contain. In addition, talc is part of a complex mixture of materials in user industries.

Talc particles are normally plate-like. When viewed under the microscope in bulk samples or on air filters, they may appear to be fibres and have been identified as such. Talc may also form as true mineral fibres that are asbestiform; asbestiform describes the pattern of growth of a mineral that is referred to as a 'habit'. Asbestiform talc fibres are very long and thin and occur in parallel bundles that are easily separated from each other by hand pressure.

Asbestos is a commercial term that describes six minerals that occur in the asbestiform habit: actinolite, anthophyllite, chrysotile, grunerite, riebeckite and tremolite (IARC, 1977). Similarly to talc, these six minerals occur more commonly in a nonasbestiform habit, and may also be elongated without being asbestiform. Actinolite, anthophyllite and tremolite may occur in some talc deposits; when asbestiform, they constitute asbestos and, when not asbestiform, they are referred to as mineral fragments or cleavage fragments.

TALC

Document 33119-15 PageID: 234741

319

Table 2.1. (Table 2.1. Cohort studies of mortality t	f mortality from and ir	icidence of c	ancer in populations o	ccupatio	nally exposed	from and incidence of cancer in populations occupationally exposed to non-asbestiform talc
Reference, location	Cohort description	Exposure assessment	Organ site	Exposure categories	No. of cases/ deaths	Relative risk (95% CI)	Adjustment factors; comments
Rubino <i>et al.</i> (1976), Germanesca	1992 male talc workers (1514 miners 478	Occupational history from plant records; respirable dust	All cancers	All miners All millers	100	SMR 0.8 (0.6–0.9) 0.9 (0.7–1.2)	Adjusted for age;
and Chisone	millers) employed	_		Minore (mnoce to come)	<u>i</u>		age-matched controls from
(Piedmont),	exposed job	estimation of cumulative		Level 1: 566–1699	38	1.2 (0.8–1.6)	controls matched on vital
Italy	during 1921– 1974; hired 1921–	exposure for individual workers, expressed as		Level 2: 1700–5665 Level 3: 5666–12750	28 34	1.0 (0.7–1.4)	status at date of entry into study;
	1950; mortality			Millers (mppcf–years)			miners and millers exposed
	follow-up, 1921-	duration (years) and		Level 1: 25–141	18	1.1 (0.2–3.2)	to a very pure form of talc;
	74; vital status,	exposure (million		Level 2: 142–424	13	1.3 (0–2.9)	miners also exposed to
	90%; cause of	particles per cubic foot,		Level 3: 425–906	11	0.7 (0.4–2.7)	inhalable silica;
	death: 95% of	mppcf); classification of					significantly elevated SMRs
	exposed workers,	workers into 3 levels of	Lung,	All miners	6	0.5 (0.2–0.9)	for silicosis with and
	95% of controls	exposure	bronchus and	All millers	4	0.6 (0.2–1.6)	without tuberculosis among
			trachea				miners; estimates increased
				Miners (mppcf–years)			with increasing cumulative
				Level 1: 566–1699	\mathfrak{C}	1.1 (0.6–1.7)	exposure; no observed cases
				Level 2: 1700–5665	_	0.5 (0.7–2.3)	of mesothelioma;
				Level 3: 5666–12750	5	1.1 (0.4–1.3)	no smoking data for
				Millers (mppcf–years)			exposed workers or
				Level 1: 25–141	æ	1.7 (0.3–4.9)	unexposed controls
				Level 2: 142–424	_	1.25 (0–7.0)	
				Level 3: 425–906	С	I	

320

Table 2.1 (contd)

IARC MONOGRAPHS VOLUME 93

,							
Reference, location	Cohort description	Cohort description Exposure assessment	Organ site	Exposure categories	No. of cases/ deaths	Relative risk (95% CI)	Adjustment factors; comments
Rubino et al. (1979), Germanesca and Chisone valleys (Piedmont), Italy	1678 male talc workers (1260 miners, 418 millers); mortality follow-up, 1946–74	Same exposure categories as Rubino <i>et al.</i> (1976)	Lung	All miners All millers All millers Miners (mppcf-years) Level 1: 566–1699 Level 2: 1700–5665 Level 3: 5666–12750 Millers (mppcf-years) Level 1: 25–141 Level 2: 142–424 Level 3: 425–906	8 4 2 1 5 6 1 0	SMR 0.5 (0.2–0.9) 0.7 (0.2–1.7) 0.5 (0–1.9) 0.2 (0.5–1.2) 0.6 (0.2–1.4) 2.0 (0.4–5.8) 0.7 (1.7–3.7)	Re-analysis of cohort reported in Rubino <i>et al.</i> (1976); SMRs recalculated using national death rates instead of comparison with neighbouring rural population; national death rates available only from 1951 onward; rates for 1951 were applied for 1946–50
Selevan <i>et al.</i> (1979), Vermont, USA	392 white male talc workers (163 miners, 225 millers) employed >1 year between 1940 and 1969; mortality follow-up: date of first radiogram, 12-month employment anniversary or January 1940, whichever was later; follow-up through 1975; vital status: 99%; cause of death: 94%	Historical insufficient information to calculate cumulative exposure histories; cohort classified into two work areas: mining and milling.	All causes All cancers Respiratory cancer	Total cohort Millers Miners Total cohort Millers Miners Total cohort Millers	90 44 16 7 7 7 7 8	SMR 1.2 [0.9–1.4] 1.2 [0.9–1.6] 1.3 [0.9–1.8] [1.3 (0.7–2.0)] [0.8 (0.3–1.9)] [1.7 (0.7–3.5)] [1.6 (0.6–3.5)] [1.6 (0.6–3.5)] [1.7 (1.4–10.1)]	Adjusted for age, sex, race, calendar year; US death rates: 1940–67; linear extrapolation for all causes of death: 1967–69. Vermont death rates for specific causes of death: 1949–75; workers selected from annual radiographic survey of dusty trades; no data on smoking habits for millers or miners; exposure to radon daughters in mine; radiographic evidence of pneumoconiosis in most workers who died from nonmalignant respiratory disease